

# CADH

## *Connecticut Association of Directors of Health, Inc.*



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**Public Health**  
Prevent. Promote. Protect.

### Public Health Committee Hearing Friday, March 6, 2009

Senator, Harris, Representative Ritter and Members of the Public Health Committee, thank you for the opportunity to speak to you today. I am Rick Matheny, Director of Health for the Farmington Valley Health District, serving 106,000 residents in the towns of Avon, Barkhamsted, Canton, Colebrook, East Granby, Farmington, Granby, Hartland, New Hartford and Simsbury. I also serve as the President of the Connecticut Association of Directors of Health, Inc.

There is some irony in the fact that Connecticut is considering significant cuts to local public health while each day you cannot pick up a newspaper or turn on a TV or radio without hearing about the salmonella outbreak that has unnecessarily stolen lives and sickened many. I am here today to defend what, by all accounts, is the very modest investment that Connecticut makes to local public health. Is Connecticut consciously deciding to forgo the public health protections that protect our communities and save lives?

This salmonella outbreak is but one example of what happens when you fail to invest in PREVENTION and the policies, programs and local health departments that PREVENT disease, PROMOTE health and PROTECT your residents.

This salmonella outbreak is a foreshadowing of what will happen in your communities if funding to local public health is cut.

So, how do we convince you, during these difficult economic times, that you MUST continue to invest in local public health when the work we do is often invisible? Effective public health is measured by the things we don't see—food borne outbreaks, infectious disease outbreaks, children with recurring lead poisoning, and vaccine preventable illness. Effective public health is measured by the things we all take for granted—safety of the food we eat, safety of the water we drink, safety of our children's day care, access to vaccines, and policies that prevent exposure to health hazards.

Under the Governor's proposal, state funding for local public health would no longer be provided to 77 municipalities where 64% of the residents in Connecticut live. Health Districts currently serving 17 municipalities would no longer exist. And funding for the remaining municipalities would be drastically cut.

Under the Governor's proposal, everyone should think twice—

- about the safety of the food you eat
- about the safety of the water you drink
- about the safety of your child's daycare
- about the safety of the public pool and public bathing areas you swim in
- about the uncontrolled spread of a disease outbreak in your community
- about the new and emerging infections that will go undetected
- about the ability of your community to protect you during pandemic flu or other large scale outbreak

Thank you.



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## **LOCAL PUBLIC HEALTH NEEDS YOUR HELP NOW MORE THAN EVER!!!**

### **BACKGROUND:**

Currently, state per capita (per person) funding for local health departments is \$5,347,208.98, roughly \$1.52 per person. This funding helps provide full-time public health services for 93% of the state's population.

Under the Governor's proposed budget, Per Capita Grant funds for local health departments will be cut 44%. This proposal would:

1. Eliminate **ALL** Per Capita funding to 77 municipalities where 64% (2,261,001) of Connecticut residents live. This includes:
  - i. Eliminating funding to the 32 full-time municipal health departments that serve 1,694,030 state residents.
  - ii. Eliminating 7 of the Current 20 Health Districts because of a new definition of "regional health departments" that defines them as serving three or more municipalities and a populations of >50,000. This impacts 343,737 residents.
  - iii. Providing no funding for the 28 part-time health departments.
2. Funding for "regional health departments" will be decreased to \$1.25 a reduction of 40% for towns with population of >5,000 and 49% for towns with population of <5,000.

### **Is your local health agency impacted? YES!**

#### **THIS CUT WILL HAVE GRAVE IMPLICATIONS FOR LOCAL PUBLIC HEALTH--HOW SO?**

- 76% of local health departments will have to lay off trained public health professionals including sanitarians, inspectors, public health nurses and health educators.
- As a result of staffing reductions, local health departments will be forced to reduce or eliminate programs. This could have disastrous effects on health:
  - An increased risk of food borne outbreaks. Local health departments will not have the staff to conduct restaurant inspections as required by state law.
  - Disease outbreaks may go unrecognized or spread out of control because of delays in communicable disease follow-up and investigation.
  - Residents will not be able to assume that the daycare facilities they are sending their children to have been inspected. Health inspections ensure the safety of the water and the absence of lead poisoning threat.
  - Lack of follow-up on community complaints regarding rats, poorly maintained swimming pools, and blight will put the public at increased risk of West Nile Virus, Lyme disease, rabies and other diseases.
  - Elimination of chronic disease prevention and management programs will result in increased medical costs.
- Local health departments are already challenged to provide the public health protections that Connecticut residents demand and deserve. This cut would decimate existing local public health programs and services.

**Connecticut Association of Directors of Health, Inc.**  
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# State of Connecticut Local Health Departments and Districts, July 2008

## Health Districts<sup>1,2</sup>

- 1 Westport Weston
- 2 Torrington Area
- 3 Naugatuck Valley
- 4 Northeast
- 5 East Shore
- 6 North Central
- 7 Chesproct
- 8 Farmington Valley
- 9 Quinnipiac Valley
- 10 Bristol-Burlington
- 11 Pomperaug
- 12 Uncas
- 13 Ledge Light
- 14 Newtown
- 15 West Hartford-Bloomfield
- 16 Central Connecticut
- 17 Eastern Highlands
- 18 Chatham
- 19 Trumbull-Monroe
- 20 Connecticut River Area

## Sovereign Nations

- A Mohegan Tribe
- B Mashantucket Pequot Tribe

Numbers are assigned by date of formation of Health Districts.

<sup>1</sup>Health Districts are defined as towns, cities, boroughs united to form district departments of health and have a full-time Health Director.



- Legend**
- Health Districts<sup>2</sup>
  - Municipalities with Full-Time Health Director
  - Municipalities with Part-Time Health Director
  - Sovereign Nations

**Local Health Administration**



Changes:

June 2006  
 Added East to Westport Health District  
 Added East Lyme to Ledge Light Health District  
 Added New Britain to Central Connecticut Health District  
 Added New Britain to Central Connecticut Health District  
 Added new district: Connecticut River Area Health District  
 Added new district: East Shore Health District  
 June 2007  
 Added Westport to Torrington Area Health District  
 Changed Cheshire to Farmington Valley Health District  
 Added New Canaan to Full-Time Health District  
 June 2008  
 Added Hamden to Chatham Health District

0 4.5 9 18 27 36 Miles